

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 746-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

**HOBBS OCD**  
**RECEIVED**  
**AUG 14 2019**

**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO.	30-025-28450
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input type="checkbox"/> private <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Double SS
8. Well Number	2
9. OGRID Number	141402
10. Pool name or Wildcat	Yates ,7 rrvs,Queen
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator Fulfer Oil & Cattle LLC

3. Address of Operator 101 E. Panther, P.O.Box 1227 Jal N.M. 88252

4. Well Location  
 Unit Letter C : 330 feet from the North line and 2310 feet from the W line  
 Section 35 Township 24-S Range 36 E NMPM LEA County

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: TA Status Test <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

8/13/2019 We perform T.A. status test due to new operator and compliance order. CIBP is set at 2990- April 2008 by West Brook OIL. the well will be evaluated for possible re perforation and fracture Job. we request 1 year extension to complete surveying, test was witnessed by Kerry Fortner w/ OCD, and Mike Dennis Fulfer operations supervisor.

**FINAL TA STATUS- EXTENSION**

Approval of TA EXPIRES: 2-14-20  
 Well needs to be PLUGGED OR RETURNED  
 to PRODUCTION  
 BY THE DATE STATED ABOVE: 27

Spud Date: 11/4/83

Rig Release Date: 11/11/83

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Mike Dennis TITLE Operations Supervisor DATE 8/14/2019

Type or print name Mike Dennis E-mail address: mdennis3082q@gmail.com PHONE: 575-395-9970

APPROVED BY: Kerry Fortner TITLE C. O. A DATE 8-14-19

Conditions of Approval (if any):

State of New Mexico  
 Energy, Minerals and Natural Resources Department  
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <b>Fulfer Oil &amp; Cattle LLC</b>		API Number <b>30-025-28450</b>
Property Name <b>Double SS</b>		Well No. <b>002</b>

1. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<b>C</b>	<b>35</b>	<b>24-S</b>	<b>36-S</b>	<b>330</b>	<b>N</b>	<b>2310</b>	<b>W</b>	<b>Lea</b>

Well Status

<input checked="" type="checkbox"/> YES TA'D WELL	NO	<input checked="" type="checkbox"/> YES SHUT-IN	NO	INJ	INJECTOR	SWD	<input checked="" type="checkbox"/> OIL PRODUCER	GAS	DATE <b>8-13-19</b>
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OBSERVED DATA

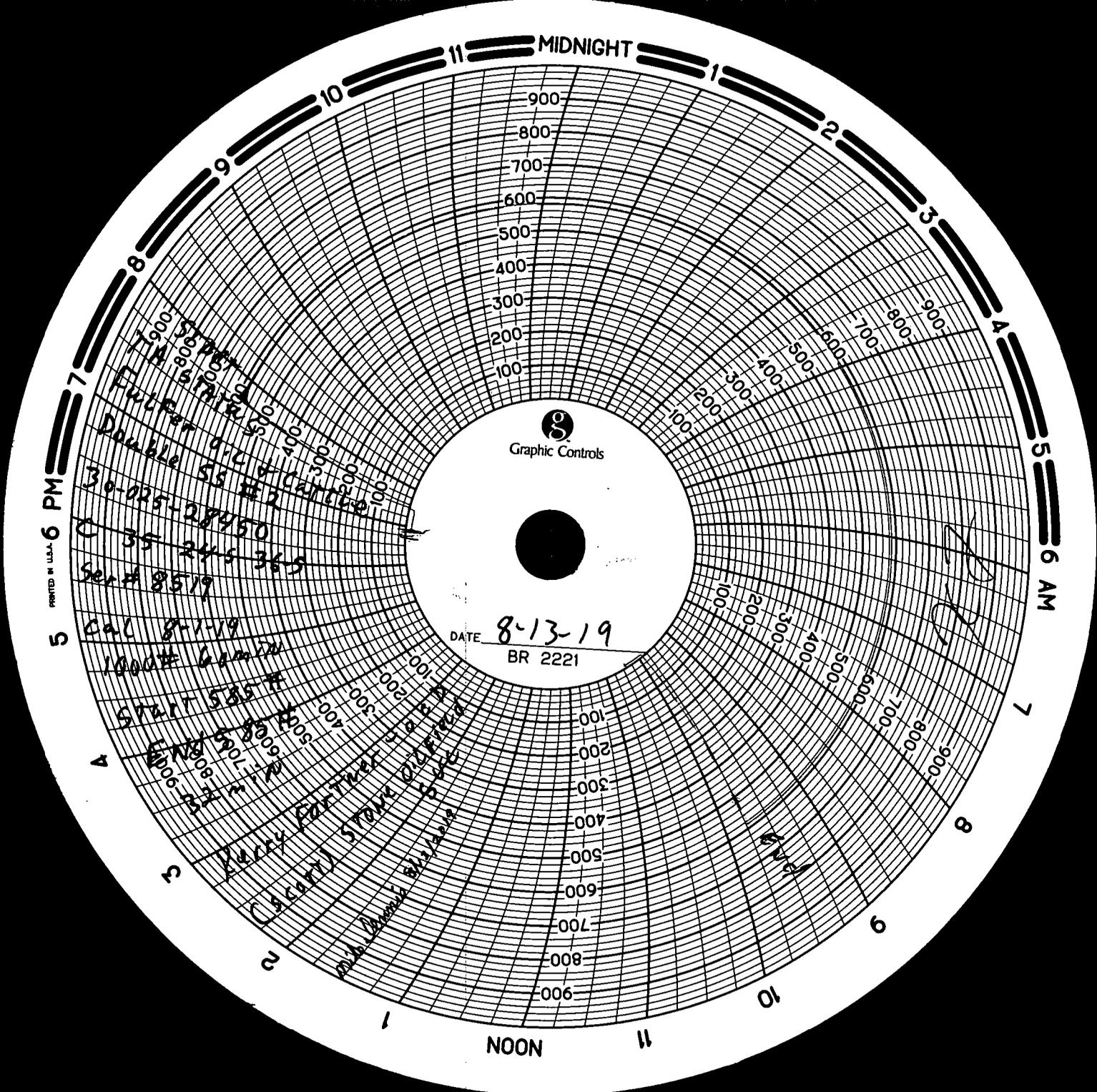
	(A)Surface	(B)Intern(1)	(C)Intern(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>NA</b>	<b>NA</b>	<b>0</b>	<b>TA</b>
Flow Characteristics					
Puff	<b>Y / <input checked="" type="checkbox"/></b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / <input checked="" type="checkbox"/></b>	CO2 WTR ___ GAS ___ Type of Fluid Injected for Waterflood if applies
Steady Flow	<b>Y / <input checked="" type="checkbox"/></b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / <input checked="" type="checkbox"/></b>	
Surges	<b>Y / <input checked="" type="checkbox"/></b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / <input checked="" type="checkbox"/></b>	
Down to nothing	<b><input checked="" type="checkbox"/> / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b><input checked="" type="checkbox"/> / N</b>	
Gas or Oil	<b>Y / <input checked="" type="checkbox"/></b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / <input checked="" type="checkbox"/></b>	
Water	<b>Y / <input checked="" type="checkbox"/></b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / <input checked="" type="checkbox"/></b>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**TA STATUS TEST**  
~~Scott~~ (SCOTT) STONE OILFIELD SERV  
 ser # 8519  
 cal 8/1/19

Signature: <i>Mike Dennis</i>	OIL CONSERVATION DIVISION
Printed name: <b>MIKE DENNIS</b>	Entered into RBDMS
Title:	Re-test <i>KF</i>
E-mail Address:	
Date:	
Phone:	
Witness: <b>Kerry FORTNER - O.C.D.</b> <b>399-3221</b>	

INSTRUCTIONS ON BACK OF THIS FORM



Graphic Controls

DATE 8-13-19  
BR 2221

PRINTED IN U.S.A. 6 PM

1000# Gemini  
START 5:35 P  
END 8:00 P  
30-225-28450  
35-244-365  
Ser # 8519  
CAL 8-1-19  
Double 55 #2  
C  
A  
C  
N  
1  
11  
10  
9  
8  
7  
6  
5  
4  
3  
2  
1  
MIDNIGHT  
NOON

1000# Gemini